

# STATE OF TENNESSEE TENNESSEE REAL ESTATE APPRAISER COMMISSION APPRAISAL MANAGEMENT COMPANY REGISTRATION DEPARTMENT OF COMMERCE AND INSURANCE 500 JAMES ROBERTSON PARKWAY NASHVILLE, TENNESSEE 37243 Phone (615) 741-1831 Fax (615) 253-1692

http://tn.gov/commerce/boards/treac/index.shtml

* FOR OFFICE USE ONLY	Transaction Number:
Profession 1504; Initial Application 1010	File Number:
APPLICATION FEE OF \$2,000,00 MI	ST RE SURMITTED WITH THIS APPLICATION PAVARLE TO

APPLICATION FEE OF \$2,000.00 MUST BE SUBMITTED WITH THIS APPLICATION PAYABLE TO THE STATE OF TENNESSEE. PAYMENT MAY BE MADE BY PERSONAL CHECK, CERTIFIED CHECK, OR MONEY ORDER.

#### PLEASE ATTACH THE FOLLOWING REQUIRED DOCUMENTS:

- 1) CHARACTER INFORMATION AFFADAVIT FOR THE CONTROLLING PERSON **AND** ANY PERSON OWNING MORE THAN TEN PERCENT (10%) OF THE APPRAISAL MANAGEMENT COMPANY
- 2) CLEAR COPY OF A DRIVERS LICENSE OR OTHER PHOTO IDENTIFICATION FOR THE CONTROLLING PERSON AND ANY PERSON OWNING MORE THAN TEN PERCENT (10%) OF THE APPRAISAL MANAGEMENT COMPANY
- 3) AN IRREVOCABLE UNIFORM CONSENT TO SERVICE OF PROCESS
- 4) A SURETY BOND IN THE AMOUNT OF TWENTY THOUSAND DOLLARS (\$20,000,00)

,,
APPRAISAL MANAGEMENT COMPANY NAME:
MAILING ADDRESS:
PHYSICAL BUSINESS ADDRESS (If different):
BUSINESS PHONE NUMBER:
BUSINESS E-MAIL ADDRESS:
WEBSITE:
CONTROLLING PERSON (REQUIRED):
SOCIAL SECURITY NUMBER DATE OF BIRTH
CONTROLLING PERSON MAILING ADDRESS:  (REQUIRED IF DIFFERENT FROM ABOVE; IF SAME ADDRESS INDICATE SAME AS ABOVE)
CONTROLLING PERSON PHONE NUMBER:
CONTROLLING PERSON E-MAIL ADDRESS:

### AFFADAVIT OF CONTROLLING PERSON

compliance with all applicable state laws and rules on loperation in Tennessee. I have never been convicted of	(Name of Controlling Person) do hereby certify that 62-39-410 as the designated controlling person to ensure behalf of the registered Appraisal Management Company's fa criminal act involving moral turpitude. I have not had a ed or surrendered in lieu of disciplinary action in any state.
Appraisal Management Company for appraisa certification in good standing issued by the Tecertification is required to perform appraisals, proceeding a system in place to review, on a periodice estate appraisal services in Tennessee for the estate appraisal services are being conducted in Maintains a detailed record of each service required Tennessee and the appraiser who performs the Company, pursuant to § 62-39-417.  4) Maintains an irrevocable uniform consent to set Certifies that each person that owns more than has been reviewed to ensure that no such persons.	that a person being added to the appraiser panel of the l services to be performed in Tennessee holds a license or ennessee Real Estate Appraiser Commission, if a license or bursuant to T.C.A. § 62-39-415. It is basis, the work of all appraisers who are performing real Appraisal Management Company to validate that the real accordance with USPAP, pursuant to T.C.A. § 62-39-416. It is traceives for appraisal services within the state of real estate appraisal services for the Appraisal Management
designee during normal business hours.  I further certify that I have personally accepted the ass. T.C.A. § 62-39-402. If there is any change in my status I will notify the Real Estate Appraiser Commission of the commission of t	
SIGNATURE OF CONTROLLING PERSON	PRINTED NAME OF CONTROLLING PERSON
STATE OF	COUNTY OF
SWORN TO AND SUBSCRIBED BEFORE ME THIS	ГНЕ DAY OF,
NOTARY PUBLIC	
	SEAL
MY COMMISSION EXPIRES	

# OWNERSHIP INTEREST DECLARATION FOR OWNERSHIP OF 10% OR MORE OF THE AMC

You ma	ay make additional copies	of these pages as m	nay be necess	ary.		
	None					
	Any individual or any more of the Appraisal l form if necessary. Pleas	Management Comp	oany is listed	below. You	may make addi	tional copies of this
NAME	:					
	CI	HARACTE	R INFO	RMATI	ON	
IF A	NY OF THESE QUESTI		ERED YES. EN STATE		PLAIN IN A S	UPPLEMENTAL
profess order, f	ou ever been denied an ap ional license of any type d inal order, suspension, rev	lisciplined in Tenne	essee or elsew	here? This wo	ould include a co	onsent order, agreed
proceed	ing.	Yes		No		
	re currently formal admin y professional license or r			ary complaints	s pending agains	t you in connection
		Yes		No		
	ou ever been convicted of or misdemeanor) charge i			o any criminal	offense, or is the	ere any criminal
		Yes		No		
	y final administrative orde etition, complaint, declara?					
		Yes		No		
DISQU BEFOR REQUI AND D NUMB	ONS WHO ANSWER "YES ALIFIED FOR REGISTR. RE THE COMMISSION TO RED TO SUBMIT A SUP- OCUMENTATION REGA ER 3, YOU ARE REQUIR CASES IF YOU ANSWE	ATION; HOWEVEI O EXPLAIN HIS/H. PLEMENTAL STAT RDING SUCH AN ED TO PROVIDE (	R, THE APPI ER ANSWER TEMENT WH SWERS. IF Y CERTIFIED	JICANT MAY I (S) TO THE Q IICH PROVID YOU ANSWER COPIES OF T	BE REQUIRED UESTION(S), A ES ADDITIONA ED "YES" TO Q HE COURT DO	TO APPEAR ND WILL BE L INFORMATION QUESTION CUMENTS IN ALL

- PROVIDE IN WRITING THE FOLLOWING, WHERE APPLICABLE:

  1. A COMPLETE LISTING OF ALL DISCIPLINARY SANCTIONS IMPOSED AGAINST ALL OF YOUR APPRAISER AND OTHER PROFESSIONAL LICENSES OR REGISTRATIONS ALONG WITH THE DATES SUCH DISCIPLINE WAS IMPOSED;
  - 2. TRUE AND CORRECT COPIES OF ALL SUCH DISCIPLINARY SANCTIONS, AND FORMAL ADMINISTRATIVE CHARGES AND DISCIPLINARY COMPLAINTS WHICH ARE PENDING IN CONNECTION WITH ANY APPRAISER OR OTHER PROFESSIONAL LICENSE OR REGISTRATIONS THAT YOU HOLD; AND
  - 3. TRUE AND CORRECT COPIES OF ALL FINAL ADMINISTRATIVE ORDERS, OR JUDGEMENTS, OR DECREES OF COURT ENTERED AGAINST YOU WHERE YOU WERE CHARGED IN THE

# PETITION, COMPLAINT, DECLARATION, ANSWER, COUNTERCLAIM OR OTHER PLEADING WITH ANY FRAUDULENT OR DISHONEST DEALING.

I have fully read and understand this application and the information given herein is true, correct and complete to the best of my knowledge. I agree to provide the Commission complete copies of any and all documents upon which any "yes" answer is based. If so requested by the Tennessee Real Estate Appraiser Commission, I will furnish all additional information or documentation as may be deemed necessary for the verification of the information given here, and in my supplemental statement. I acknowledge that this application may be disapproved for cause and that any registration, license or certification that I may obtain may be revoked for supplying false, incomplete or misleading information to the Commission. I agree to comply with the standards set forth in T.C.A, Title 62, Chapter 39, and I understand that violations of this chapter and the rules of the Tennessee Appraisal Management Company Registration shall be grounds for disciplinary proceedings against me.

NAME:			
SOCIAL SECURITY NUMBER			
MAILING ADDRESS:			
BUSINESS PHONE NUMBER:			
BUSINESS E-MAIL ADDRESS:			
Signature		Date	
State of	County of		
Sworn to and subscribed before me this the	day of		
Notary Public		SEAL	
My Commission Expires:			
Date			

# APPRAISAL MANAGEMENT COMPANY SURETY BOND – TENNESSEE Pursuant to T.C.A. § 62-39-408 (b) and Rules & Regulation 1255-08-01 (3)

			Bond Number:			
KNOW ALL PER	RSONS BY THESE	PRESENTS:				
That we,				, as		
Tennessee in the s	urety business in the sum of TWENTY T		Surety, are held and fit 100 DOLLARS (\$20,00	a corporation rmly bound unto the State of 00), for the payment of which y these presents.		
Appraisal Manage Comp. R, & Regs extended by the apsecure the perform	ement Company in 7 . 1255-08-01 (3). T ppraiser. The bond	Tennessee, and gives the bond may not be use shall accrue to the State ant's obligation. Any cl	is bond pursuant to T.C ed to assist appraisers in e for the benefit of a cla	as applied for registration as an C.A. § 62-39-408 (b) and Tenn. In collection efforts of credit aimant against the registrant to amount of the bond must be		
Company under T	Cenn. Code Ann. § 6		ny rules or regulations	of an Appraisal Management adopted thereunder, then this		
to the Tennessee I and the Surety sha First Class U.S. M	Real Estate Appraise all be relieved of any fail. In no event sha ne biennial registrat	er Commission and the y further liability under all the Surety's total liab	Principal at their address this bond thirty (30) data polity for all claims arisis	thirty (30) days notice in writing ssess last known to the Surety, ays after such notice is sent by ing out of the Principal's Any revision of the bond		
Dated this	day of	, 20	·			
Signature of Princip	pal	Printed I	Name of Principal			
Name of Surety Cor	mpany	Address	s of Surety			
Name of Surety Age	ent	Signatu	re of Surety Agent			
(Seal)		Address	s of Surety Agent			

## IRREVOCABLE CONSENT TO SERVICE OF PROCESS

Each entity applying for registration as an Appraisal Management Company in Tennessee shall complete an irrevocable consent to service of process as prescribed by the Commission. T.C.A. § 62-39-407

Appraisal Management Company Name:	
Appraisal Management Company Address:	
Appraisal Management Company Phone Number:	
Appraisal Management Company email and webs	ite address (if applicable):
T.C.A. § 62-39-407, the Appraisal Management 0 that suits and actions may be commenced against Tennessee and agrees that any lawful process of appointed agent for service of process shall have the Appraisal Management Company directly. Treason of such service. The Appraisal Management	Appraisal Management Company Registration and Regulation Act Company named above irrevocably consents, stipulates and agree st it any court of competent jurisdiction and proper venue within or pleading in any action against it in Tennessee made upon the same legal force and validity as if the service had been made of the Appraisal Management Company waives all claims of error beent Company agrees to submit an amended Appointment of Agen the information provided. Any changes to the agent information teal Estate Appraiser Commission.
Consent to Service of Process so that legal action Management Company in any jurisdiction within In witness whereof, the controlling person of the	as controlling person of the Appraisal -39-402 (8) am authorized to sign and execute the Irrevocable may be commenced against the above listed Appraisal the state of Tennessee.  Appraisal Management Company executes this Irrevocable may of
Signature of Controlling Person	Printed Name of Controlling Person
State of	County of
Sworn to and subscribed before me this the	, day of,
Notary Public	SEAL
My Commission Expires:Date	

**FORM IN-1756** 

## APPOINTMENT OF AGENT FOR SERVICE OF PROCESS

If the entity is not a corporation that is domiciled in this state, the name and contact information for the company's agent for service of process in this state. T.C.A. 62-39-403(b) (4)

Agent for Service of Process:	
Agent for Service of Process Address:	
Agent for Service of Process Phone Number:	
Agent for Service of Process email address and we	bsite (if applicable):
T.C.A. § 62-39-403 (b)(4), the foreign Appraisal agent for service of process within the state of T may be commenced against it any court of compthat any lawful process or pleading in any action of process shall have the same legal force and valid Company directly. The Appraisal Management C Appraisal Management Company agrees to subm	ppraisal Management Company Registration and Regulation Admanagement Company named above designates the above namennessee and consents, stipulates and agrees that suits and action etent jurisdiction and proper venue within Tennessee and agree against it in Tennessee made upon the appointed agent for service dity as if the service had been made on the Appraisal Management of the service and claims of error by reason of such service. That an amended Appointment of Agent for Service of Process for y changes to the agent information shall be effective upon received.
Agent for Service of Process so that legal action in Management Company in any jurisdiction within In witness whereof, the controlling person of the	as controlling person of the Appraisal 39-402 (8) am authorized to sign and execute Appointment of ay be commenced against the above listed Appraisal he state of Tennessee.  Appraisal Management Company executes this Appointment of of,
Signature of Controlling Person	Printed Name of Controlling Person
State of	County of
Sworn to and subscribed before me this the	day of,
Notary Public	SEAL
My Commission Expires:Date	

**FORM IN-1756**